PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0032 Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Red	uction Act of 1995	, no person are requ	ired to re	espond to a collection	on of informat	ion unless it displays	a valid OMB co	ontrol number
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
						9/802,481-Conf. #5875		
FEE TRANSMITTAL				Filing Date March 6,		March 6, 2001	001	
For FY 2009			L	First Named Inventor Pa		aul Willard		
F01 F1 2003				Examiner Name N. Sub		N. Subramania	ubramanian	
X Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 585,00				Artonic		692		
TOTAL AMOUNT OF PAYME		Attorney Docket No. 132538-1014						
METHOD OF PAYMENT (check all that apply)								
x Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 07-0153 Deposit Account Name: Gardere Wynne Sewell LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of gee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARC	H, AND EXAM	INATION FEES						
		G FEES	SEA	RCH FEES	EXAMIN	IATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$) F	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	id (\$)
Utility	330	165	540	270	220	110	1000.	
Design	220	110	100	50	140	70		
Plant	220		330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES							Sr	nall Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							52	26
•		ig Reissues)					220	110
Multiple dependent claims			-	5 : 1 (6)			390	195
- 20 or HP			Fee	e Paid (\$) Multiple Fee (\$)			Dependent Claims Fee Paid (\$)	
HP = highest number of total cl	aims paid for, if gr			· · · · · · · · · · · · · · · · · · ·	1.6	<u>∈ (Ψ)</u> •	CC T did (Q)	
				Paid (\$)				·
3 or HP = HP = highest number of indepe								
3. APPLICATION SIZE FE	E							
If the specification and d listings under 37 CFR	1.52(e)), the	application size f	ee due	is \$270 (\$135 t	onically fil for small er	ed sequence or a	computer Iditional 50	
sheets or fraction ther		, , , , , ,		/ CFK 1.16(S). ditional 50 or frac	ation thoron	f Eco.(\$)	Fee Pa	id (\$)
	Extra Sheets	/50 =					<u> </u>	iia (a)
4. OTHER FEE(S)				, 	,	··	Fees Pa	aid (\$)
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) 1806 Submission of an Information Disclosure Statement							405.00 180.00	
SUBMITTED BY								
Signature Au	//	w.		Registration No. Attorney/Agent)	32,506	Telephone	(214) 999-	4880
7//	Hubbard	XVV.		AuomoyiAgeill)		Date	October 31	
7								
								
I hereby certify that this pape the date shown below with s	er (along with an	y paper referred to a	as being	attached or endo	sed) is being	deposited with th	e U.S. Postal S	Service on
Alexandria, VA 22313-1450		as Filst Class Wall,			10 K		2, 1 .O. DOX 140	·~,

Dated: October 31, 2008